North East Ambulance Service NHS
NHS Foundation Trust

For Life

North East Paramedic Pathfinder

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What is Paramedic Pathfinder?

- Created by NWAS CP Mark Newton and GP David Ratcliffe (2012), HSJ award winner
- A safe, effective clinical decision making support tool which identifies when patients are suitable for referral to an alternative care provider
- Intention of reducing unnecessary transfers to Emergency Departments

Rationale for Paramedic Pathfinder

- A higher level of service demand
- Increased urgent and unscheduled care needs
- Larger choice of UCC providers / alternative pathways
- ED is no longer deemed the most appropriate place for all patients

Advantages of Paramedic Pathfinder

- Patients benefit through receiving the most appropriate care
- Clinicians benefit as the clinical risk of under or over triage is reduced
- Increased operational efficiency
- Decreased organisational risk

The Vision

- Reduce the number of high intensity service users being admitted for in-patient care
- Increase the numbers of patients accessing care away from Emergency Departments
- Enhance the quality of care for patients with non-time-critical presentations.

For Example

Average journey time of patient admitted in to an A&E dept.

- Mobile to scene – 10 minutes
- On scene – 30 minutes
- Mobile to hospital – 20 minutes
- Handover process – 15
- Post handover process – 10 minutes

- Overall incident time – **85 minutes.**

Average journey time of patient placed on an alternative care pathway.

- Mobile to scene – 10 minutes
- On scene time – 45 minutes (extra time for referral process)

- Overall incident time – **55 minutes**.

Paramedic Pathfinder Background

- Based on Manchester Triage System
- Uses a flow chart of specific symptoms and clinical observations to determine the most appropriate care pathway for the patient
- Uses the National Early Warning Score (NEWS) as part of the triage process

National Early Warning Score (NEWS)

- Identifies patients with critical physiological deterioration
- Generates an indicative score from routine observations
- A score >4 requires transport to ED (as per local guidelines)
- National system used by a number of ambulance services

National Early Warning Score (NEWS)

- In order to calculate the NEWS it is necessary to perform a series of observations:

Respiratory rate

Oxygen saturations

Temperature

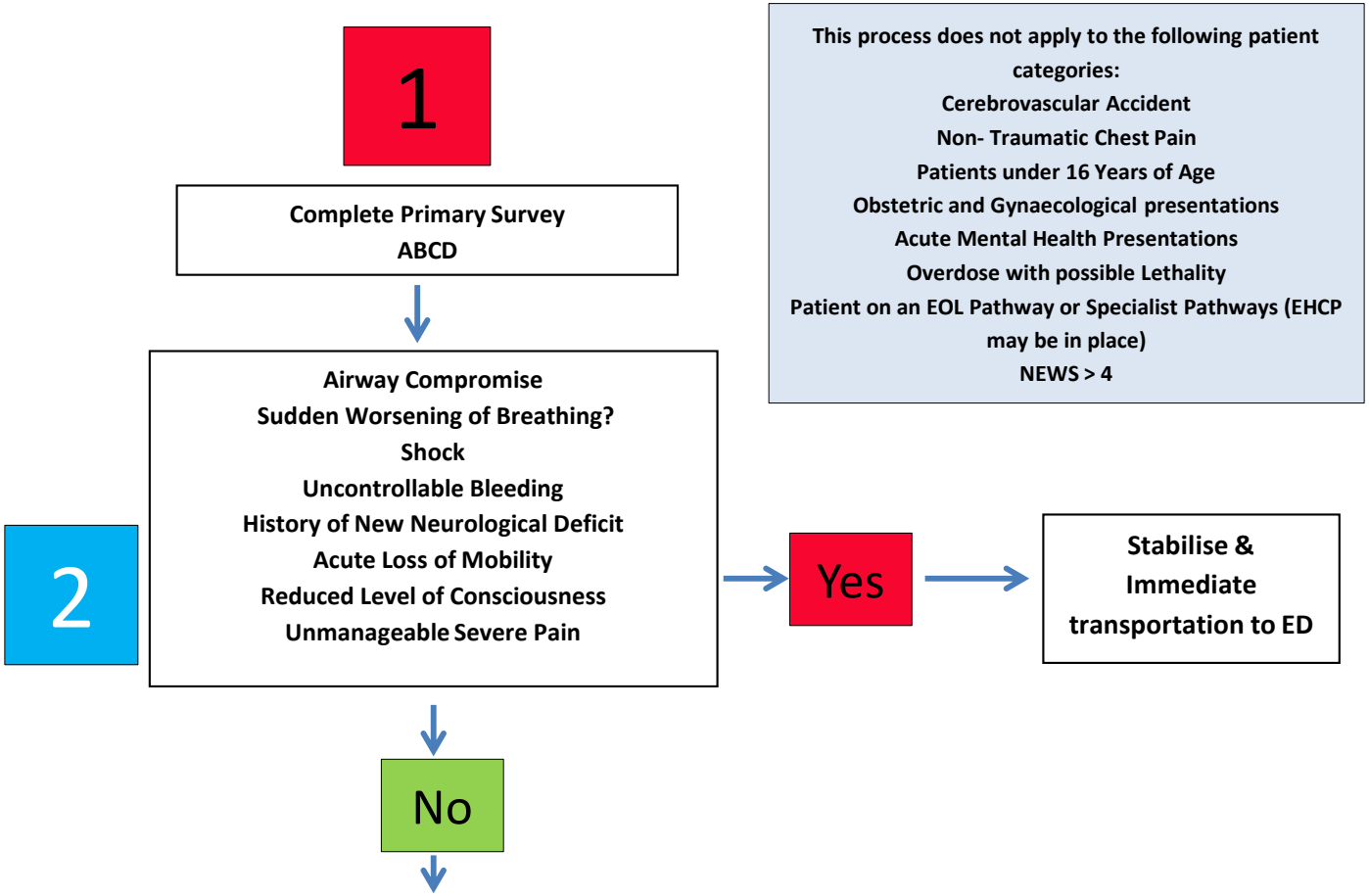
Systolic blood pressure

Pulse rate

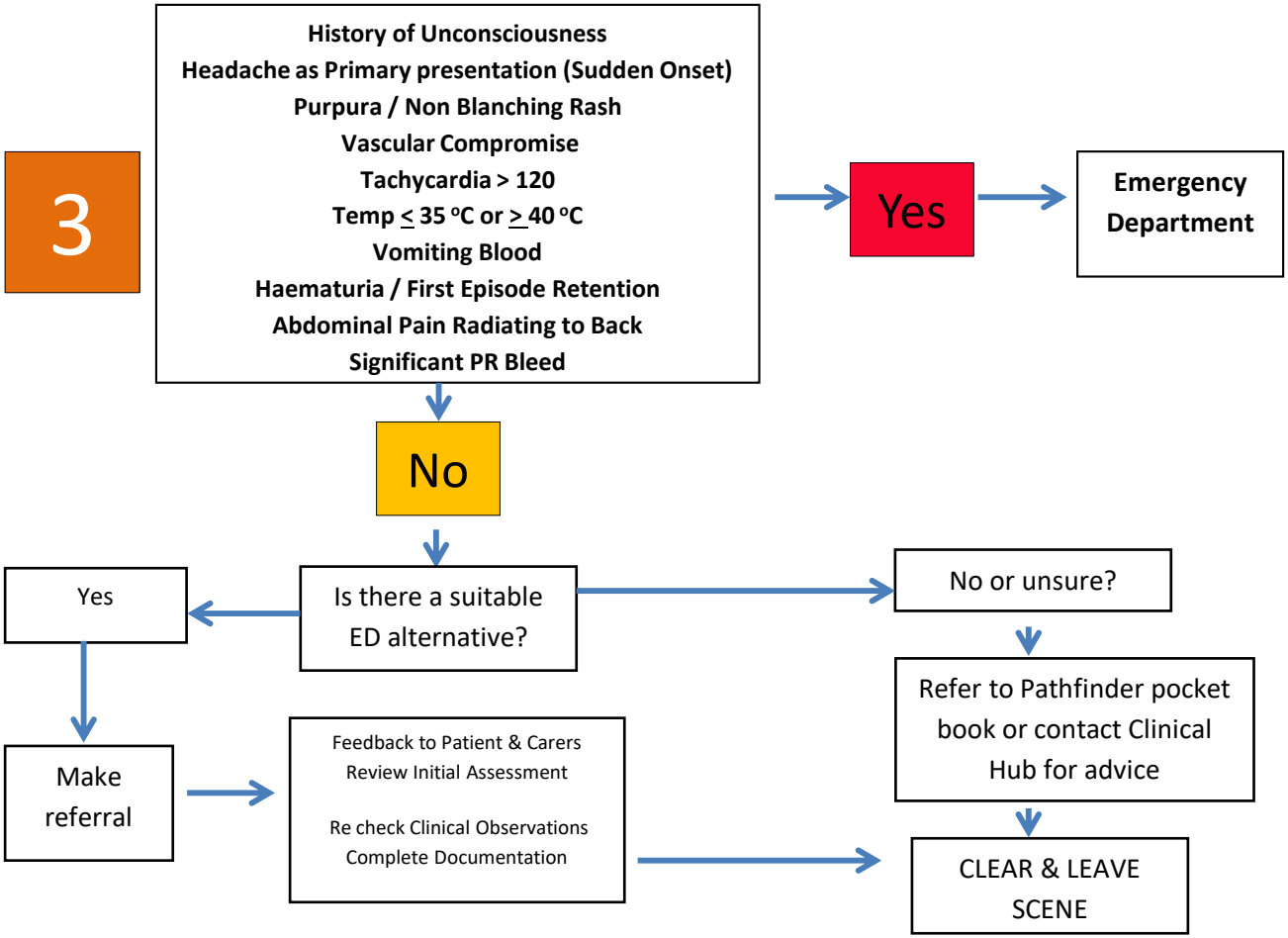
Level of consciousness

+ any supplement oxygen

Pathfinder – Medical



Pathfinder – Medical cont.



Pathfinder – Trauma

1

Complete Primary Survey
CABCD

2

Airway Compromise
Sudden Worsening of Breathing?
Shock
Uncontrollable Bleeding
History of New Neurological Deficit
Acute Loss of Mobility
Reduced Level of Consciousness
Unmanageable Severe Pain
Significant MOI (Inc spinal immobilisation)
Head injury with loss of consciousness
Head Injury with amnesia in a patient aged over 65
OR has history of coagulopathy

Yes

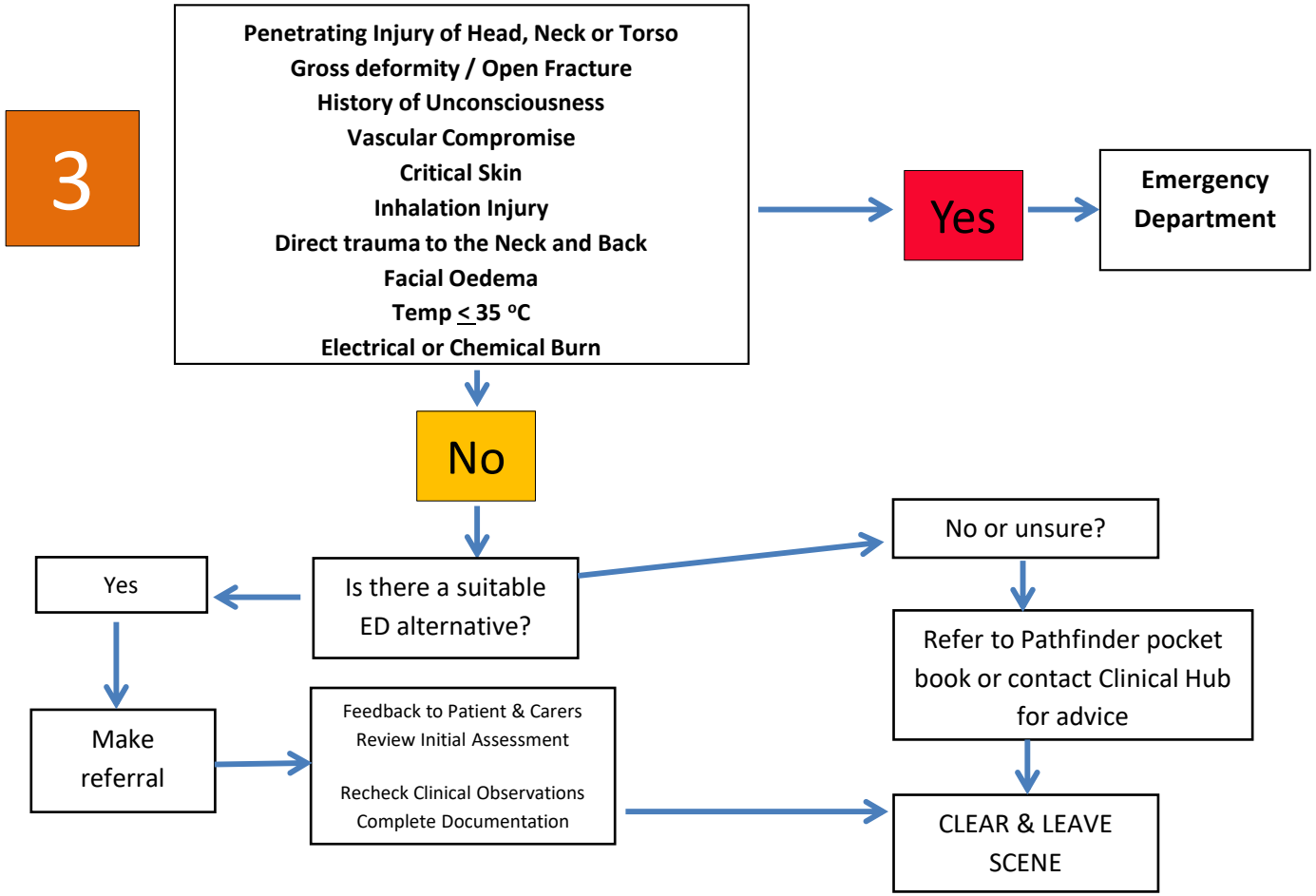
Stabilise & Immediate transportation to ED

Consider the Major Trauma Bypass protocol

No

This process does not apply to the following patient categories:
Obvious minor injury not requiring further assessment
Cerebrovascular Accident
Non-Traumatic Chest Pain
Patients under 16 years of Age
Obstetric and Gynaecological Presentations
Acute Mental Health Presentation
NEWS >4

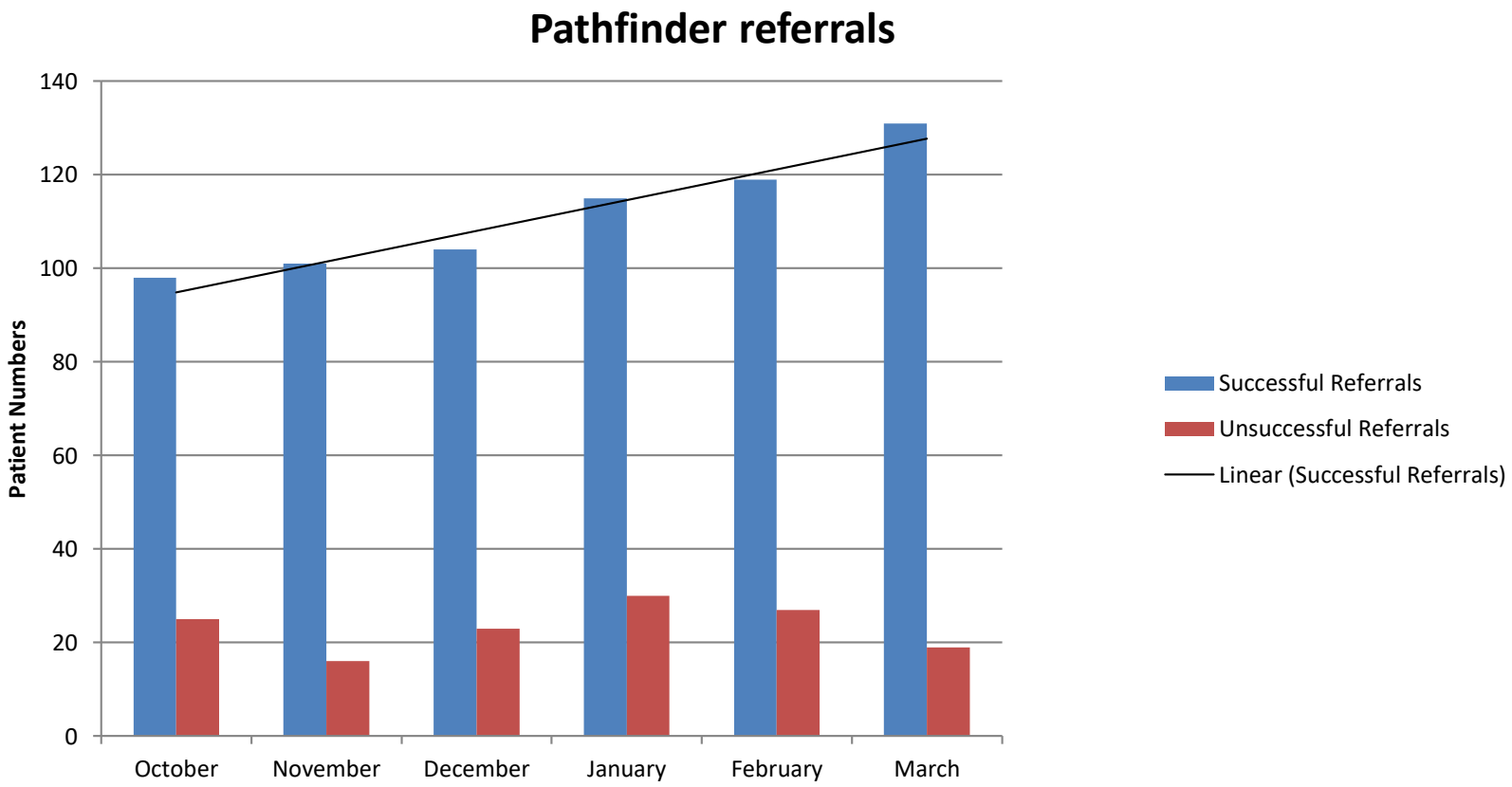
Pathfinder – Trauma cont



Rapid Handover

- A system to place ‘safe’ patients directly into the waiting room
- Dovetails with the pathfinder system
- Involves buy-in from Acute Trusts

Pathfinder Referrals to Date



Pathfinder Referrals to Date - Monthly Totals

- 34% increase in successful referrals since October 2016

- Unsuccessful referrals have remained fairly static

Month	Successful Referrals	Unsuccessful Referrals
September	10	
October	98	25
November	101	16
December	104	23
January	115	30
February	119	27
March	132	19
Total	669	140

Expansion of Pathfinder within NEAS

- Training of additional staff in Pathfinder (100 trained in pilot)
- Expansion into South and North Tyneside localities (business cases submitted)
- Full service implementation and expansion (subject to CCG negotiation and agreement)

Pathways

- Staff have direct access to Emergency Ambulatory Care, Urology and Renal Ambulatory Care
- Continued development of new referral pathways in existing areas
- Working with Sunderland CCG to integrate Paramedic Pathfinder with the Consultant Connect pilot

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